

835 Health Care Claim Payment/Advice Companion Guide

**Refers to ASC X12 835 Technical Report Type 3 Guide
HIPAA/V5010X221A1**

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Preface

This Companion Guide to the ASC X12N Implementation Guides and associated errata adopted under HIPAA clarifies and specifies the data content when exchanging electronically with Delta Dental of California. Transmissions based on this companion guide, used in tandem with the X12N Technical Report Type 3 Guides are compliant with both X12 syntax and those guides. This Companion Guide is intended to convey information that is within the framework of the ASC X12N Implementation Guides adopted for use under HIPAA. The Companion Guide is not intended to convey information that in any way exceeds the requirements or usages of data expressed in the Implementation Technical Report Type 3 Guides.

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1 Introduction

Under the Administrative Simplification provisions of the Health Insurance Portability and Accountability Act (HIPAA) of 1996, the Secretary of the Department of Health and Human Services (HHS) is directed to adopt standards to support the electronic exchange of administrative and financial health care transactions. The purpose of the Administrative Simplification portion of HIPAA is enable health information to be exchanged electronically and to adopt standards for those transactions.

1.1 Scope

This companion guide is intended for all Trading Partners interested in exchanging HIPAA compliant X12 transactions with any of Enterprise Delta Dental Payers. It is intended to be used in conjunction with X12N Implementation Guides and is not intended to contradict or exceed X12 standards. It contains information about specific Delta Dental of California requirements for processing following X12N Implementation Guides:

Health Care Claim Payment/Advice 835 Implementation Guide ASC X12 Standards for Electronic Data Interchange Technical Report Type 3 (TR3), version 005010X221A1

All instructions in this document are written using information known at the time of publication and are subject to change.

1.2 Overview

The purpose of this document is to introduce and provide information about Delta Dental's Enterprise solution for receiving 835 transactions. This document covers how Delta Dental will work with Trading Partners on testing, connectivity, contact information, control segments/envelopes, payer specific business rules and limitations, acknowledgements, and trading partner agreements.

1.3 References

The ASC X12N 835 (version 005010X221A1) Technical Report Type 3 guide for Health Care Claim Payment/Advice (835) has been established as the standard for payments transactions and is available at <http://store.x12.org/store/healthcare-5010-original-guides>.

Delta Dental of California's documentation on transactions for Trading Partners is located at: <http://www.deltadentalins.com/dentists/edi-support.html>.

2 Getting Started

2.1 Working with Delta Dental of California

Entities interested in receiving 835/Electronic Remittance Advice (ERA) via the Delta Dental enterprise solution should email or call the Delta Dental EDI contact related to Trading Partner Relations.

2.2 Trading Partner Registration

New entities must submit in writing or email a request to become a Trading Partner to the Delta Dental of California EDI contact related to Trading Partner Relations. Delta Dental reserves the right to have new Trading Partners use existing Trading Partner connections. In the request, submitter must include the following information:

Contact Name	
Company Name	
Address, City, State and Zip	
E-Mail address of contact	
Telephone of contact	
Number of Delta Enterprise Provider Clients Served	

2.3 Trading Partner Enrollment/Onboarding

All Trading Partners, Clearinghouses, and Providers groups will be provided with applicable agreement during enrollment/onboarding period.

3 Notes to the Trading Partners

3.1 Business Use and Purpose

This document provides a statement of the 835 utilization requirements unique to Delta Dental processing. Clearinghouses and Trading Partners must use this guide in conjunction with the 835 Health Care Claim Payment/Advice Transaction Implementation Guide (TR3).

3.2 Claims Types

The supported claim types are as follows:

1. Dental Claims
2. Dental Pre-Treatment Estimates

Delta Dental's Notes for the Trading Partners:

DeltaCare claims/encounters and Delta Vision claim types are not supported at this time. This will be part of DeltaCare Phase 2 conversion targeted by end of 1st QTR 2014.

3.3 Data Sources

Remittance Advices and Pre-treatment Estimates returned in the 835 include finalized claims/pre-treatment estimates from the following submission sources:

1. Electronic claims (837D)
2. Paper claims
3. Manually-entered/System-generated claims to Delta Dental's claims adjudication system

Delta Dental's Notes for the Trading Partners:

Once Provider Groups/Providers are enrolled to receive 835/ERA, the applicable 835/ERA will be generated and sent after each Payment Processing (PP) cycle regardless of the submission sources.

3.4 Generation Frequency

1. Delta Dental's system produces Individual Remittance Advice and Pre-Treatment Estimate transactions once a week for each Delta Dental payer. This is based on weekly Payment Processing (PP) schedules defined for each Delta Dental payer.
2. The Individual Remittance Advice and/or Pre-Treatment Estimate transactions are batched at the end of the day into an 835 EDI file. The 835 EDI files are batched based on specific Trading Partner/Delta Dental Payers. If a system

limitation or agreed transmission size limitation is met, multiple 835 EDI files may be generated for each TP/Payers.

3. Batching of X12 835 transactions occurs once a day after each Payment Processing (PP) cycles.

3.5 Data Content/Structure

1. An 835 transaction will have one Interchange Group (ISA/IEA), one Functional Group (GS/GE), and may have one or more Transaction Sets (ST/SE).
2. A Transaction Set (ST/SE) may contain either an individual Pre-Treatment Estimate or an Individual Remittance Advice.
3. A Remittance Advice will reflect claims and service lines details associated with a payment.
4. Adjustments will be returned in 2110 Service Payment Information Loop, CAS segment. The CAS segment in 2100 Claim Payment Information loop is not utilized by Delta Dental.

3.6 Validation/Balancing

HIPAA Validation levels 1, 2, and 3 will be performed on the generated 835 EDI file(s). The amounts reported in the 835 will be balanced at the service line, claim, and transaction levels.

3.7 Delimiters

Segment Separator ~ (tilde)
Data Element Separator * (asterisk)
Sub-element Separator : (colon)
Repetition Separator ^ (caret)

3.8 Other

1. Only Delta Dental-utilized loops and segments are included in this companion guide.
2. Data elements not utilized by Delta Dental are noted accordingly as "Not Utilized".
3. Codes not utilized by Delta Dental are excluded from this guide.
4. Supplemental notes (Delta Dental's Note for the Trading Partner), if applicable, are added at the segment or data element level.

4 Testing with the Payer

4.1 Testing Requirements

Trading Partner will use the following steps to test with any of Enterprise Delta Dental Payers.

Step 1: Trading Partner Registration

Trading Partner should contact Delta Dental of California to complete and submit the Trading Partner Agreement Form for registration process.

Step 2: Trading Partner Authentication

Delta Dental will verify the information on the Trading Partner Agreement Form and will approve the Submitter ID requests.

Step 3: Trading Partner Validation/Testing

Testing environment will be setup between Trading Partners and Delta Dental to allow for end-to-end system integration and Trading Partner Validation (TPV). Trading Partner should will receive 835/ERAs test transactions and verify that all systems involved can properly receive and process X12 compliant transactions. The Usage Indicator (ISA15) on 835/ERA's must be "T".

Step 4: Trading Partner Implementation

Once Trading Partner Validation (TPV) and end-to-end system integration testing is complete, a Trading Partner will be migrated to Production environment and can begin to receive and process 835/ERA transactions. The Usage Indicator (ISA15) on 835/ERA's must be "P".

4.2 Provider 835 Request Enrollment File

Trading Partners who are interested in setting up Providers for 835/ERA must submit Provider Enrollment File. The following information must be provided to setup any Providers to receive 835/ERA.

Fixed Length Records = 200 Bytes

File Type = Text

File Name = DLTAP835.txt

4.3 Provider 835 Request Enrollment File Notifications

Delta Dental will perform a series of file level validations on each 835 provider enrollment file based on the specifications outlined in section 4.4 and 4.5 of this document. If a provider enrollment file fails any of the validation at either the header level or the detail level the corresponding trading partner/sender will receive a file processing failure notification via email with the below mentioned information and none of the provider records from the file will be enrolled for the 835 ERA until the file is corrected and resubmitted.

Notification Method – Email

Sender – noreply-Prod-Moveit@delta.org

Subject – Provider 835 Enrollment File Processing Failure On '*Date MM/DD/YYYY*'

Body – File '*provider 835 enrollment file name*' has failed file format validations and will not be processed further by Delta Dental. Please correct and resubmit the file to ensure enrollment of the corresponding providers for the 835 ERA process. For further inquiries or questions please reach out to deltadentalproduction@delta.org.

Thank you,

Delta Dental

4.4 Provider 835 Request Header Record Layout

Field Name	Description	Length	Start Position	Technical Specification
Record Type	PRO identifiers Header	3	1	Must contain a value or PRO. This is Uppercase PR followed by the number zero.
File ID	Identifies that this is a file of Provider ID's that have requested electronic remittance	9	4	Must contain a value of P835REQST. All letters must be uppercase.
Record Count	Total Number of PR1 Provider 835 Request Records Sent on File	9	13	Numeric Left Pad with Zeros
Trading Partner Name	Identifies Trading Partner.	15	22	Alphanumeric - case sensitive Right Pad with Spaces : Valid Values are: EMDEON EHG TESIA QSI SecureEDI
Trading Partner Receiver ID	Identifies Trading Partner.	8	37	Alphanumeric - case sensitive: for EMDEON value is 'DDNEIC00' for EHG value is 'DDSRIX00' for TESIA value is 'DDTESX00' for QSI value is 'DDQSIX00' for SecureEDI value is 'DDSEDI00'

Create Date	Date File was created	8	45	CCYYMMDD - must be valid date
Application Reciever Code	Value to be populated on 835's	15	53	Value to be determined by Trading Partner
Filler		133	68	Spaces

4.5 Provider 835 Request Detail Record Layout

Field Name	Description	Length	Start Position	Technical Specification
Record Type	PR1 Identifiers Provider Request Detail Record	3	1	PR1
Provider Group Tax ID Number	TIN of Provider Group Requesting electronic 835	9	4	Alphanumeric - Right Pad with Spaces
Provider Group Name	Name of Group Provider	30	13	Alphanumeric - Right Pad with Spaces
Provider Group NPI	NPI for the Group Provider. This is the Type 2 NPI.	30	43	Alphanumeric - Right Pad with Spaces
Provider Group 835 Dual Delivery Requested	Indicates whether or not 835 Dual Delivery is requested or waived. Dual Delivery refers to the 835 start-up period where the provider will receive both paper and electronic 835's	1	73	Alphanumeric Y = Provider Group wants 835 dual Delivery. They will receive both paper and electronic 835's for the number of days specified in Provider Group Dual Delivery Days. N = Provider Group waives 835 dual delivery period. This Provider Group wants to only receive electronic 835's once they are setup up. <i>NOTE: If this field is left blank or contains any value other than 'N' or 'Y', the default value of 'Y' will be used.</i>

<p>Provider Group Dual Delivery Days</p>		<p>2</p>	<p>74</p>	<p>Alphanumeric - Right Pad with Spaces</p> <p>This is the number of days (1 - 99) during which a provider group will receive both paper and electronic 835's.</p> <p><i>Note:</i> <i>This field is ignored when Dual Delivery Requested is 'N'.</i></p> <p><i>When the Dual Delivery Requested is 'Y' and this field is "0" or non_numeric, the default of 31 days will be used.</i></p> <p><i>Keep in mind that Delta Dental only pays claims weekly so if the days is set low it is possible that the Dual Delivery Period will end before any 835's are generated.</i></p>
<p>Filler</p>		<p>125</p>	<p>76</p>	<p>Spaces</p>

5 Connectivity with the Payer / Communications

5.1 Transmission Administrative Procedures

Trading Partner must use Delta Dental's designated secured FTP drop zone - <https://ftp.delta.org/> to login and retrieve 835 X12 files. Trading Partner using the designated FTP drop zone must use authorized User ID and Password to login and retrieve 835 X12 files.

5.1.1 Re-transmission procedures

Trading Partners must send a request to Delta Dental's EDI Contact for any missing 835 X12 files for re-transmission.

5.2 Communication Protocols Specifications

The Delta Dental enterprise solution for 835 transactions supports transactions formatted according to the ASC X12 Standards for Electronic Data Interchange Technical Report Type 3 (TR3).

5.3 Passwords

Delta Dental of California security policies requires Trading Partners to use authorized User ID and Password to login via the designated secured FTP site <https://ftp.delta.org/>.

6 Contact information

6.1 EDI Customer Service

Trading Partner Relations Manager: Rajkumar Narayanaswamy
Phone Number: 415.802.9243
Email Address: rnarayanaswamy@delta.org

Operation Hours:
Monday through Friday between 8:00 a.m. and 5:00 p.m., Pacific Standard Time

Excluding the following major holidays:

- New Year's Day (1/1)
- Martin Luther King's Day (3rd Monday in January)
- President's Day (3rd Monday in February)
- Memorial Day (Last Monday in May)
- Independence Day (7/4)
- Labor Day (1st Monday in September)
- Thanksgiving Day (4th Thursday in November)
- Day after Thanksgiving Day (4th Friday in November)
- Christmas Eve (12/24)
- Christmas Day (12/25)

6.2 Provider Service Number

If you have questions regarding information related to subscribers that are non-technical, contact center information can be found at the following:
<http://www.deltadentalins.com/about/contact/>

6.3 Applicable websites / e-mail

<http://www.deltadentalins.com/about/contact/>

<http://www.deltadentalins.com/dentists/edi-support.html>

7 Control Segments / Envelopes

7.1 ISA Interchange Control Header

Delta Dental's Notes for the Trading Partner:

The Table describes the value specifically required by Delta Dental 835 transaction within the ISA Header. The Delta Dental 835 transaction does not expect any custom values for the IEA segment. Please follow the rules as specified by the TR3.

Loop ID	Segment / Element ID	Data Element Name	Codes	Delta Dental Notes
N/A	ISA			
	ISA01	Authorization Information Qualifier	00	
	ISA02	Authorized Information		10 Blank Spaces
	ISA03	Security Information Qualifier	00	
	ISA05	Interchange ID Qualifier	ZZ	
	ISA04	Security Information		10 Blank Spaces
	ISA06	Interchange Sender ID	942411167	
	ISA07	Interchange ID Qualifier	ZZ	
	ISA08	Interchange Receiver ID		As specified for each Trading Partner
	ISA09	Interchange Date	YYMMDD	
	ISA10	Interchange Time	HHMM	
	ISA11	Repetition Separator	^	
	ISA12	Interchange Control Version Number	00501	
	ISA13	Interchange Control Number	000000001	Starts with 000000001
	ISA14	Acknowledgment Requested	0	0 – No ACK (TA1 or 999) Requested; 1 - No ACK (TA1 or 999) Requested
	ISA15	Interchange Usage Indicator	T/P	T –Test Data; P –Production Data
	ISA16	Component Element Separator	:	

7.2 GS Functional Group Header

Delta Dental's Notes for the Trading Partner:

The table below describes Delta Dental of California's use of the functional group control segments. It includes a description of expected application sender and receiver codes. Also included in this section is a description concerning how Delta Dental of California expects functional groups to be sent and how Delta Dental of California will send functional groups. These discussions will describe how similar transaction sets will be packaged and Delta Dental of California's use of functional group control numbers. The Delta Dental 835 transaction does not expect any custom values for the GE segment. Please follow the rules as specified by the TR3 for the GE segment.

Loop ID	Segment / Element ID	Data Element Name	Codes	Delta Dental Notes
N/A	GS			
	GS01	Functional Identifier Code	HP	
	GS02	Application Sender's Code	942411167	
	GS03	Application Receiver's Code		As specified for each Trading Partner
	GS04	Date	YYYYMMDD	
	GS05	Time	HHMM	
	GS06	Group Control Number	1	
	GS07	Responsible Agency Code	X	
	GS08	Version / Release / Industry Identifier Code	005010X221A1	

7.3 ST Transaction Set Header

Delta Dental's Notes for the Trading Partner:

The Delta Dental 835 does not expect any custom values for the ST segments.

Please follow the rules as specified by the TR3.

Loop ID	Segment / Element ID	Data Element Name	Codes	Delta Dental Notes
N/A	ST			
	ST01	Transaction Set Identifier Code	835	
	ST02	Transaction Set Control Number		Starts with 0001 or 000000001

7.4 BPR Financial Information

Delta Dental's Notes for the Trading Partner:

BPR05 through BPR10 and BPR12 through BPR15 are sent when BPR04 is "ACH".

Loop ID	Segment / Element ID	Data Element Name	Codes	Delta Dental Notes
N/A	BPR			
	BPR01	Transaction Handling Code	H - Notification Only; I - Remittance Information Only	
	BPR02	Monetary Amount		Total Actual Provider Payment Amount including Interest
	BPR03	Credit/Debit Flag Code	C - Credit	As specified for each Trading Partner
	BPR04	Payment Method Code	ACH - Automated Clearing House (ACH); CHK – Check; NON - Non-Payment Data	
	BPR05	Payment Format Code	CCP- Cash Concentration/Disbursement plus Addenda (CCD+) (ACH)	
	BPR06	(DFI) ID Number Qualifier	01 - ABA Transit Routing Number Including Check Digits (9 digits); 04 - Canadian Bank Branch and Institution Number	
	BPR07	(DFI) Identification Number	External Code List Name: 91 Description: Canadian Financial Institution Branch and Institution Number External Code List Name: 60 Description: (DFI) Identification Number	

			External Code List Name: 4 Description: ABA Routing Number	
	BPR08	Account Number Qualifier	DA - Demand Deposit	
	BPR09	Account Number		
	BPR10	Originating Company Identifier		Payer Tax ID prefixed with "1"
	BPR11	Originating Company Supplemental		Payer ID from Delta Dental's system, may or may not be identical to the Payer ID from submitted claim.
	BPR12	(DFI) ID Number Qualifier	01 - ABA Transit Routing Number Including Check Digits (9 digits); 04 - Canadian Bank Branch and Institution Number	
	BPR13	(DFI) Identification Number	External Code List Name: 91 Description: Canadian Financial Institution Branch and Institution Number External Code List Name: 60 Description: (DFI) Identification Number External Code List Name: 4 Description: ABA Routing Number	
	BPR14	Account Number Qualifier	DA- Demand Deposit; SG – Savings	
	BPR15	Account Number		
	BPR16	Date		Possible values: Check Issue Date (when BPR04 value is "CHK")

				<p>EFT Effective Date (when BPR04 value is "ACH")</p> <p>Claim Receipt Date (when BPR04 value is "NON")</p>
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7.5 TRN Reassociation Trace Number

Loop ID	Segment / Element ID	Data Element Name	Codes	Delta Dental Notes
N/A	TRN			
	TRN01	Trace Type Code	1 - Current Transaction Trace Numbers	
	TRN02	Reference Identification		
	TRN03	Originating Company Identifier		Payer Tax ID prefixed with "1"
	TRN04	Reference Identification		Payer ID from Delta Dental's system, may or may not be identical to the Payer ID from submitted claim.

7.6 REF Receiver Identification

Loop ID	Segment / Element ID	Data Element Name	Codes	Delta Dental Notes
N/A	REF			
	REF01	Reference Identification Qualifier	EV - Receiver Identification Number	
	REF02	Reference Identification		Delta Dental's Notes for the Trading Partner: Trading Partner ID

7.7 N1 Payer Identification

Loop ID	Segment / Element ID	Data Element Name	Codes	Delta Dental Notes
1000A	N1			
	N101	Entity Identifier Code	PR – Payer	
	N102	Name		Please refer to Delta Dental Enterprise Programs and corresponding Payer ID below.
	N103	Identification Code Qualifier	XV - Centers for Medicare and Medicaid Services Plan ID	
	N104	Identification Code	External Code List Name: 540 Description: Centers for Medicare and Medicaid Services Plan ID	

Delta Dental Program	Payer ID
Delta Dental of California	77777
Delta Dental of Delaware	51022
Delta Dental of West Virginia	31096
Delta Dental of District of Columbia	52147
Delta Dental of Pennsylvania	23166
Delta Dental of New York	11198
Delta Dental Insurance Company (AL, FL, GA, LA, MS, MT, NV, UT, TX)	94276
American Association of Retired Personnel (AARP)	AARP1
Community Partnership Program – California (CPP-CA)	CPPCA
Texas Cook's Children	CPPCC
Delta Dental of Puerto Rico	660436769

7.8 PER Payer WEB Site

Delta Dental's Notes for the Trading Partner:

When the REF/Healthcare Policy Identifier segment is required, the corresponding 1000A/Payer Identification loop, PER/Payer Web Site also needs to be included in the 5010 835/Remittance Advice Transaction.

Loop ID	Segment / Element ID	Data Element Name	Codes	Delta Dental Notes
1000A	PER			
	PER01	Contact Function Code	IC - Information Contact	
	PER03	Communication Number Qualifier	UR Uniform Resource Locator (URL)	URL will be provided once it becomes available
	PER04	Communication Number		

7.9 N1 Payee Identification

Loop ID	Segment / Element ID	Data Element Name	Codes	Delta Dental Notes
1000B	N1			
	N101	Entity Identifier Code	PE - Payee	
	N102	Name		Possible Values: Organization Name Individual Name (format is Last Name, First Name, Middle Name)
	N103	Identification Code Qualifier	FI - Federal Taxpayer's Identification Number; XX - Centers for Medicare and Medicaid Services National Provider Identifier	
	N104	Identification Code	External Code List Name: 537 Description: Centers for Medicare and Medicaid Services National Provider Identifier External Code List Name: 540 Description: Centers for Medicare and Medicaid Services Plan ID	Possible values: NPI from Delta Dental's system that is associated to the providers on the payment/claim. May or may not be identical to the NPI from submitted claim Tax ID, when there is no NPI in Delta Dental's system that is associated to the Providers on the payment/claim.

7.10 N3 Payee Address

Delta Dental's Notes for the Trading Partner:

Payee address from Delta Dental's system is sent.

7.11 N4 Payee City, State, Zip Code

Delta Dental's Notes for the Trading Partner:

Payee address from Delta Dental's system is sent.

7.12 REF Payee Additional Identification

Delta Dental's Notes for the Trading Partner:

This segment is generated when the NPI identifier (XX) is sent on N103 (N1 – Payee Identification segment).

Loop ID	Segment / Element ID	Data Element Name	Codes	Delta Dental Notes
1000B	REF			
	REF01	Reference Identification Qualifier	OB - State License Number D3 - National Council for Prescription Drug Programs Pharmacy Number PQ - Payee Identification TJ - Federal Taxpayer's Identification Number	TJ – Federal Taxpayer's Identification Number will be used for this implementation
	REF02	Reference Identification	External Code List Name: 307 Description: National Council for Prescription Drug Programs Pharmacy Number	Tax ID from Delta Dental's system that is associated to the providers on the payment/claim.

7.13 CLP Claim Payment Information

Loop ID	Segment / Element ID	Data Element Name	Codes	Delta Dental Notes
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2100	CLP			
	CLP01	Claim Submitter's Identifier		For electronic claims (837D): Submitted Patient Control Number (PCN) For paper claims: Patient Control Number (PCN) For manually-entered claims and system generated claims without PCN: "0" (zero)
	CLP02	Claim Status Code	1 - Processed as Primary; 2 - Processed as Secondary; 3 - Processed as Tertiary; 4 – Denied; 22 - Reversal of Previous Payment; 25 - Predetermination Pricing Only - No Payment	
	CLP03	Monetary Amount		Total Claim Charge Amount
	CLP04	Monetary Amount		Claim Payment Amount
	CLP05	Monetary Amount		Patient Responsibility Amount
	CLP06	Claim Filing Indicator Code	15 - Indemnity Insurance	
	CLP07	Reference Identification		Delta Dental-assigned Claim ID (Document Control Number – DCN)
	CLP08	Facility Code Value		

7.14 NM1 Patient Name

Delta Dental's Notes for the Trading Partner:

Delta Dental-assigned patient information may or may not be identical to the patient information from submitted 837D Electronic or paper claims.

Loop ID	Segment / Element ID	Data Element Name	Codes	Delta Dental Notes
2100	NM1			
	NM101	Entity Identifier Code	QC - Patient	
	NM102	Entity Type Qualifier	1 – Person	
	NM103	Name Last or Organization Name		Delta Dental will swap Last Name from submitted 837D Electronic or Paper claim if available.
	NM104	Name First		Delta Dental will swap First Name from submitted 837D Electronic or Paper claim if available
	NM105	Name Middle		Delta Dental will swap Middle Name from submitted 837D Electronic or Paper claims if available
	NM107	Name Suffix		
	NM108	Identification Code Qualifier	34 - Social Security Number; HN - Health Insurance Claim (HIC) Number; II - Standard Unique Health Identifier for each Individual in the United States; MI - Member Identification Number; MR - Medicaid Recipient Identification Number	Delta Dental will use MI - Member Identification Number
	NM109	Identification Code		Delta Dental will swap Identification Code from submitted 837D Electronic Claims or Paper claims if available

7.15 NM1 Insured Name

Delta Dental's Notes for the Trading Partner:

This segment is generated when Patient is NOT the Insured.

Delta Dental-assigned patient information may or may not be identical to the patient information from submitted 837D Electronic or paper claims.

Loop ID	Segment / Element ID	Data Element Name	Codes	Delta Dental Notes
2100	NM1			
	NM101	Entity Identifier Code	IL - Insured or Subscriber	
	NM102	Entity Type Qualifier	1 - Person; 2 - Non-Person Entity	
	NM103	Name Last or Organization Name		Delta Dental will swap Last Name from submitted 837D Electronic or Paper claim if available
	NM104	Name First		Delta Dental will swap First Name from submitted 837D Electronic or Paper claim if available
	NM105	Name Middle		Delta Dental will swap Middle Name from submitted 837D Electronic or Paper claims if available
	NM107	Name Suffix		
	NM108	Identification Code Qualifier	FI - Federal Taxpayer's Identification Number; II - Standard Unique Health Identifier for each Individual in the United States; MI - Member Identification Number	Delta Dental will use MI - Member Identification Number
	NM109	Identification Code		Delta Dental will swap Identification Code from submitted 837D Electronic Claims or Paper claims if available

7.16 NM1 Service Provider Name

Delta Dental's Notes for the Trading Partner:

NPI is required when enrolling Providers to receive 835/ERA from Delta Dental.

Loop ID	Segment / Element ID	Data Element Name	Codes	Delta Dental Notes
2100	NM1			
	NM101	Entity Identifier Code	82 - Rendering Provider	
			1 - Person;	
	NM102	Entity Type Qualifier	2 - Non-Person Entity	
	NM103	Name Last or Organization Name		
	NM104	Name First		
	NM105	Name Middle		
	NM107	Name Suffix		
			BD - Blue Cross Provider Number;	
			BS - Blue Shield Provider Number;	
			FI - Federal Taxpayer's Identification Number;	
			MC - Medicaid Provider Number PC Provider Commercial Number;	
			SL State License Number;	
			UP - Unique Physician Identification Number (UPIN);	
			XX - Centers for Medicare and Medicaid Services National Provider Identifier	Delta Dental will use XX - Centers for Medicare and Medicaid Services National Provider Identifier
	NM108	Identification Code Qualifier		
				NPI from Delta Dental's system that is associated to the Rendering Provider on the claim. May or may not be identical to the NPI from submitted claim
	NM109	Identification Code		

7.17 REF Rendering Provider Identification (Loop 2100)

Delta Dental's Notes for the Trading Partner:

Rendering Provider Identifiers from submitted claim are returned as received.

7.18 SVC Service Payment Information

Loop ID	Segment / Element ID	Data Element Name	Codes	Delta Dental Notes
2110	SVC			
	SVC02	Monetary Amount		Line Item Charge Amount
	SVC03	Monetary Amount		Line Item Payment Amount

7.19 REF Service Identification

Loop ID	Segment / Element ID	Data Element Name	Codes	Delta Dental Notes
2110	REF			
	REF02	Reference Identification	External Code List Name: 468 Description: Ambulatory Payment Classification	Line Item Control Number from submitted claim

7.20 REF Line Control Number

Loop ID	Segment / Element ID	Data Element Name	Codes	Delta Dental Notes
2110	REF			
	REF01	Reference Identification Qualifier	6R - Provider Control Number	
	REF02	Reference Identification		

7.21 REF Rendering Provider Information (2110)

Delta Dental's Notes for the Trading Partner:

Service Line Rendering Provider Identifier from submitted claims are returned as received.

7.22 REF HealthCare Policy Identification

Delta Dental's Notes for the Trading Partner:

The REF/Healthcare Policy Identifier is required to be included in the 2110/Service Payment Information loop when specific CARC values are included in a related CAS segment.

Loop ID	Segment / Element ID	Data Element Name	Codes	Delta Dental Notes
2110	REF			
	REF01	Reference Identification Qualifier	OK - Policy Form Identifying Number	
	REF02	Reference Identification		

7.23 PLB Provider Adjustments

Loop ID	Segment / Element ID	Data Element Name	Codes	Delta Dental Notes
N/A	PLB			
	PLB02	Date		December 31st of the payment year

Add Provider Enrollment specifications.

8 Acknowledgements

Only one response will be required for each 835 transaction that is transmitted to the Trading Partners – a TA1 or 999. The 835 Health Care Claim Payment/Advice sent by Delta Dental must be HIPAA compliant.

8.1 999 Functional Acknowledgment

When ACK (ISA14 = 1) is requested by Delta Dental, Exchange or Trading Partners must issue a 999 Acknowledgment for Health Care Insurance (005010X231 or 005010X231A) when an 835 fails validation of WEDI SNIP Type 1-3 HIPAA edits. Delta Dental does not expect positive acknowledgments for successful 835 transmissions and validation.

The purpose of the 999 Acknowledgment (Reject) is to identify critical errors within the 835 request based on the ASC X12N 835 (version 005010X221A1) Technical Report Type 3 (TR3) guide. Delta Dental will review the 999 to determine what errors occurred.

8.2 TA1 Interchange Acknowledgment

The TA1 Interchange Acknowledgment is used by the 835 transaction to communicate the rejection of a 835 transaction based on errors encountered with X12 compliance, formatting, or specific requirements of the ISA/IEA Interchange segments.

Document Revision History

Version	Date	Description of Changes	Author
0.1	7/26/2013	Initial Draft	Vanessa Nguyen
0.2	10/08/2013	Added Payer Specific Business Rules & Limitations	Vanessa Nguyen
0.3	10/16/2013	Modified several sections for clarify	Bernadette Abdon
1.0	10/31/2013	Final Draft	Bernadette Abdon
1.1	06/28/2022	Added section 4.3 (enrollment file notifications)	Shiv Uppal

